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I hereby revoke all previous powers of attorney given in the above-identified application.									
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Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)									
SIGNATURE of Applicant or Assignee of Record									
Signature	//please see attached master signature page for Laura Mezey//								
Name	Laura Mezey,	aura Mezey, Vice President & Asst. General Counsel of Bayer HealthCare LLC							
Date	October 30, 2	007	Te	lephone	(914)366-1800	(914)366-1800			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.									
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